

EPA United States Environmental Protection Agency Washington, DC 20460 Work Assignment						Work Assignment Number 4-68				
						<input type="checkbox"/> Other <input type="checkbox"/> Amendment Number:				
Contract Number EP-W-10-002			Contract Period 11/19/2009 To 09/19/2014 Base Option Period Number 4			Title of Work Assignment/SF Site Name Innova Approach for Superfund				
Contractor INDUSTRIAL ECONOMICS, INCORPORATED					Specify Section and paragraph of Contract SOW Elem 1.1 para(s) 1&3, pages 6, Elem 2, Page 9					
Purpose: <input checked="" type="checkbox"/> Work Assignment <input type="checkbox"/> Work Assignment Close-Out <input type="checkbox"/> Work Assignment Amendment <input type="checkbox"/> Incremental Funding <input type="checkbox"/> Work Plan Approval						Period of Performance From 09/20/2013 To 09/19/2014				
Comments: The purpose of this action is to initiate Work Assignment 4-68. The contractor shall submit a work plan and detailed cost estimated in accordance with the contract.										
<input type="checkbox"/> Superfund Accounting and Appropriations Data <input checked="" type="checkbox"/> Non-Superfund										
Note: To report additional accounting and appropriations data use EPA Form 1900-69A.										
SFO (Max 2) <input type="checkbox"/>										
Line	DCN (Max 6)	Budget/FY (Max 4)	Appropriation Code (Max 6)	Budget Org/Code (Max 7)	Program Element (Max 9)	Object Class (Max 4)	Amount (Dollars)	(Cents)	Site/Project (Max 8)	Cost Org/Code (Max 7)
1										
2										
3										
4										
5										
Authorized Work Assignment Ceiling										
Contract Period: Cost/Fee: LOE: 11/19/2009 To 09/19/2014										
This Action:										
Total:										
Work Plan / Cost Estimate Approvals										
Contractor WP Dated: Cost/Fee: LOE:										
Cumulative Approved: Cost/Fee: LOE:										
Work Assignment Manager Name Diedre Lloyd <div style="display: flex; justify-content: space-between;"> <div>_____ (Signature)</div> <div>_____ (Date)</div> </div>							Branch/Mail Code: Phone Number 404-562-4300 FAX Number:			
Project Officer Name Cheryl R. Brown <div style="display: flex; justify-content: space-between;"> <div>_____ (Signature)</div> <div>_____ (Date)</div> </div>							Branch/Mail Code: Phone Number: 202-566-0940 FAX Number:			
Other Agency Official Name <div style="display: flex; justify-content: space-between;"> <div>_____ (Signature)</div> <div>_____ (Date)</div> </div>							Branch/Mail Code: Phone Number: FAX Number:			
Contracting Official Name Stefan Martiyan <div style="display: flex; justify-content: space-between;"> <div>_____ (Signature)</div> <div>_____ (Date)</div> </div>							Branch/Mail Code: Phone Number: 202-564-1987 FAX Number:			